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eGRAM

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and timely information from the ADA

January 9, 2009

Please note: The eGRAM email publication sent earlier this morning did not include a link to the Expert Panel Recommendations prepared by the Council on Scientific Affairs.

This link has been added to the Quick Links section on the right, as well as within the original copy below. This updated version has been prepared to ensure that our members and constituents are equipped with the most accurate and complete information available.

JADA Study on Oral Bisphosphonates Receives Widespread Media Attention

The authors of a study published in the January issue of *The Journal of the American Dental Association* (JADA) on oral bisphosphonates and osteonecrosis of the jaw (ONJ) reported that oral use of alendronate (a bisphosphonates drug) appears to have contributed to ONJ in a subset of patients after certain dental procedures were performed. Oral bisphosphonate drugs are commonly prescribed for people with osteoporosis.

The University of Southern California, where the lead researcher is based, issued a press release about the study's findings, which generated significant media interest, including an article in the *Los Angeles Times*.

The following points and ADA resources should be helpful should your patients inquire about oral bisphosphonate therapy and ONJ. A [patient handout](#) on this topic is available for free download on ADA.org. In addition, the Council on Scientific Affairs has published a [report](#) containing recommendations for treatment of dental patients who are taking oral bisphosphonates.

Patient Communication Points

- Osteonecrosis of the jaw (ONJ) is not common, but it can be a serious condition that can cause severe destruction of jawbones.
- The American Dental Association has reviewed previous studies on this issue which indicate that

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use of oral bisphosphonates (medication commonly prescribed for patients with osteoporosis) has been associated with a low risk for developing ONJ-one study indicated 1 out of 2,260 people taking oral bisphosphonates develop ONJ. This new study from USC claims that the frequency of ONJ among oral bisphosphate users is higher than previously reported-approximately 4 percent of the people studied.

- It is worth noting that this new study involved a small number of people, and the study results may not apply to all people on oral bisphosphonate therapy. The American Dental Association believes that additional research is needed: to better define the risks of ONJ; to better understand how to prevent ONJ; and to better treat ONJ when it occurs.
- The ADA has been monitoring research on this issue for some time and published a [report](#) containing recommendations for dentists who treat patients who are taking oral bisphosphonates.
- It's important for me to know if you are on bisphosphonate drugs or if you've used them in the past because of the possible risk of developing ONJ. ONJ is uncommon, but it can be serious. If you have received bisphosphonate therapy *intravenously* related to cancer therapy, you may be at a higher risk of developing ONJ than if you take oral medication.
- Current ADA recommendations suggest that routine dental treatment generally need not be altered merely because a patient is taking or has taken oral bisphosphonates. However, patients with any history of bisphosphonate therapy should be especially encouraged to practice optimal oral hygiene and to receive routine dental examinations. Furthermore, a comprehensive oral examination and treatment before or soon after commencing bisphosphonates therapy may be beneficial for patients if they're not already receiving regular dental care to treat existing oral health problems.
- If you'd like more information about this or any other oral health topic, be sure to visit the American Dental Association's Web site at ADA.org.

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